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PTO IDENTIFIER: Application Number 10/827,054-Conf. #2370
Patent Number

Inventor: David R. Elmaleh et al.

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FROM: EDWARDS ANGELL PALMER & DODGE LLP

Marina Heusch

PHONE: (203) 975-7505

Attorney Dkt. #: 62041(51588)

PAGES (Including Cover Sheet): 6

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Power of Attorney and Correspondence Address Indication Form
Statement Under 37 CFR 3.73(b)
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Application No. (if known): 10/827,054

Attorney Docket No.: 62041(51588)

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PTO/SB/21 (09-06)

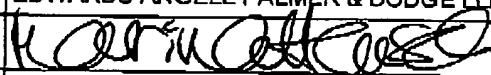
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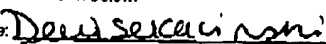
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<h1>TRANSMITTAL FORM</h1> <p><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/827,054-Conf. #2370
	Filing Date	April 19, 2004
	First Named Inventor	David Elmaleh
	Art Unit	1618
	Examiner Name	M. J. Perreira
Total Number of Pages in This Submission	Attorney Docket Number	62041(51588)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Power of Attorney and Correspondence Address Indication Form Statement Under 37 CFR 3.73(b)
Remarks		

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Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Marina Heusch		
Date	11-15-06	Reg. No.	47,647

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/827,054-Conf. #2370
	Filing Date	April 19, 2004
	First Named Inventor	David Elmaleh
	Art Unit	Unknown
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	62041(51588)

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

City

Country

State

Zip

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Date

Telephone

617 726 8629

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Dated: Nov. 15, 2006

Signature: Danise Kacinski (Danise Kacinski)

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/827,054-Conf. #2370
	Filing Date	April 19, 2004
	First Named Inventor	David Elmateh
	Title	METHOD FOR MONITORING BLOOD FLOW AND METABOLIC UPTAKE IN
	Art Unit	Unknown
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	62041(51588)

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 21874

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number.

OR

☐ Firm or Individual Name Amy Leahy
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Address P.O. Box 55874

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State MA

Zip 02205

Country US

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Email aleahy@eapdlaw.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Date
Name	Telephone
Title and Company	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Dated: NOV 15 2006 Signature: Denise Kachinski (Denise Kachinski)

PTO/SB/98 (12-05)

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STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: The General Hospital Corporation

Application No./Patent No./Control No.: 10/827,054 Filed/Issue Date: April 19, 2004

Entitled: METHOD FOR MONITORING BLOOD FLOW AND METABOLIC UPTAKE IN TISSUE WITH RADIOLABELED ALKANOIC ACID

The General Hospital Corporation, a Non-profit Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
(The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015423 Frame 0163, or a true copy of the original assignment is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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3. From: _____ To: _____
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.09]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

KBT
Signature

Nov. 7 2006
Date

Kris Betrus
Printed or Typed Name

617 726 8629
Telephone Number

Authorized Signer for Assignee
Title Licensing Mgr.

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Dated: Nov. 15, 2006 Signature: Denise Kacinski (Denise Kacinski)